

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.
107538224

FILING DATE

Page 1

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
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49						
50						
TOTAL IND.	↓		↓		↓	
TOTAL DEP.	←		←		←	
TOTAL CLAIMS						

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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99						
100						
TOTAL IND.		↓	6	↓	3	↓
TOTAL DEP.	←		92	←	39	←
TOTAL CLAIMS			98		42	

FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

APPLICANT(S)

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CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
101				/		/
102				/		/
103				/		/
104				/		/
105				/		/
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107				/		/
108				/		/
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129				/		/
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138				/		/
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142				/		/
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148				/		/
149				/		/
150				/		/
TOTAL IND.		↓		↓		↓
TOTAL DEP.	←		←		←	
TOTAL CLAIMS						

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
151				/		/
152				/		/
153				/		/
154				/		/
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193				/		/
194				/		/
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196				/		/
197				/		/
198				/		/
199				/		/
200				/		/
TOTAL IND.		↓		↓		↓
TOTAL DEP.	←		←		←	
TOTAL CLAIMS						